Case 16-39659 Doc 1 Filed 12/17/16 Entered 12/17/16 10:49:00 Desc Main Document Page 1 of 48

| Fill in this information to identify your case: | | |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | Chapter you are filing under: | |
| | ■ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | ☐ Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | rt 1: Identify Yourself | | | |
|-----|--|--|---|---|
| | | About Debtor 1: | Δ | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). | Jeffrey First name Middle name | | First name Middle name |
| | Bring your picture identification to your meeting with the trustee. | Whiting Last name and Suffix (Sr., Jr., II, III) | | _ast name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you hav | re | | |
| | Include your married or maiden names. | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-7007 | | |

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Case number (if known)

Debtor 1 Jeffrey J Whiting

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs If Debtor 2 lives at a different address: Where you live 10105 South Tripp Oak Lawn, IL 60453 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Cook County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Desc Main

Case number (if known) Debtor 1 **Jeffrey J Whiting**

| ar | t 2: Tell the Court About | Your B | Bankruptcy Ca | se | | | |
|---|---|-------------|----------------|---------------------------------|---|--|-----------|
| 7. | The chapter of the Bankruptcy Code you are | | | | of each, see <i>Notice Required by</i> f page 1 and check the appropria | 11 U.S.C. § 342(b) for Individuals Filing for Bante box. | kruptcy |
| | choosing to file under | ■ Chapter 7 | | | | | |
| | | □с | Chapter 11 | | | | |
| | | □с | hapter 12 | | | | |
| | | □с | hapter 13 | | | | |
| | | | | | | | |
| I will pay the entire fee when I file my petition. Please check w about how you may pay. Typically, if you are paying the fee yours order. If your attorney is submitting your payment on your behalf, a pre-printed address. | | | | | ourself, you may pay with cash, cashier's check, | , or money | |
| | | | | | tallments. If you choose this opt | ion, sign and attach the Application for Individual | ls to Pay |
| | | | I request tha | t my fee be wa | nived (You may request this option | on only if you are filing for Chapter 7. By law, a ju | |
| | | | applies to you | ur family size ar | nd you are unable to pay the fee | our income is less than 150% of the official pove in installments). If you choose this option, you micial Form 103B) and file it with your petition. | |
|). | Have you filed for bankruptcy within the | ■ No | | | | | |
| | last 8 years? | □ Ye | | | | | |
| | | | District | | When | Case number | |
| | | | District | | When | Case number | |
| | | | District | | When | Case number | |
| 10. | Are any bankruptcy cases pending or being | ■ No | 0 | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | □ Ye | ? S. | | | | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| 11. | Do you rent your | | o. Go to li | ne 12. | | | |
| | residence? | ■ Ye | es. Has yo | ur landlord obta | ained an eviction judgment again | st you and do you want to stay in your residence | ? |
| | | | ■ | No. Go to line | 12. | | |
| | | | | Yes. Fill out In bankruptcy per | | Judgment Against You (Form 101A) and file it w | vith this |

Debtor 1 Jeffrey J Whiting

Document Page 4 of 48

Case number (if known)

| Par | Report About Any Bu | sinesses | You Own | as a Sole Propriet | or | | |
|-----|---|--|-----------------|--------------------------------------|---|--|--|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | | | |
| | | ☐ Yes. | Name | and location of busi | iness | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | of business, if any | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | | er, Street, City, Stat | | | |
| | it to this petition. | | | | x to describe your business: | | |
| | | | | | ess (as defined in 11 U.S.C. § 101(27A)) | | |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) | | |
| | | | | Stockbroker (as de | efined in 11 U.S.C. § 101(53A)) | | |
| | | | | Commodity Broke | r (as defined in 11 U.S.C. § 101(6)) | | |
| | | | | None of the above | | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B). | | | | | |
| | For a definition of small | ■ No. | I am r | ot filing under Chap | ter 11. | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am f Code. | | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy | | |
| | | ☐ Yes. | I am f | iling under Chapter | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | |
| Par | t 4: Report if You Own or | Have Any | Hazardo | us Property or Any | Property That Needs Immediate Attention | | |
| 14. | Do you own or have any | ■ No. | | | | | |
| | property that poses or is alleged to pose a threat | ☐ Yes. | | | | | |
| | of imminent and identifiable hazard to public health or safety? | L 103. | What is | the hazard? | | | |
| | Or do you own any property that needs immediate attention? | | | liate attention is why is it needed? | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | s the property? | Number, Street, City, State & Zip Code | | |
| | | | | | | | |

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Debtor 1 Jeffrey J Whiting

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

| I received a briefing from an approved credit |
|---|
| counseling agency within the 180 days before I filed |
| this bankruptcy petition, and I received a certificate of |
| completion. |

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 48 Case number (if known) Debtor 1 Jeffrey J Whiting Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." vou have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **2**5,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion \$0 - \$50.000 estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jeffrey J Whiting Signature of Debtor 2 Jeffrey J Whiting Signature of Debtor 1

Executed on

MM / DD / YYYY

Executed on December 7, 2016

MM / DD / YYYY

Debtor 1 Jeffrey J Whiting

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Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ James J. Morrone | Date | December 7, 2016 |
|--|---------------|-------------------------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| James J. Morrone | | |
| James J. Morrone Law, PC | | |
| Firm name | | |
| 12820 South Ridgeland, Unit C | | |
| Palos Heights, IL 60463 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone (708) 653-3142 | Email address | lawoffice@jamesmorronelaw.com |
| 6201661 | | |
| Bar number & State | | |

| | | Docume | ent Page 8 of 48 | |
|---------------------|--------------------------|-------------------|------------------|--------------------------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Jeffrey J Whiting | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | | Your as | ssets f what you own |
|-----|--|--------------|-------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 34,500.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 34,500.00 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 22,829.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 30,886.00 |
| | Your total liabilities | \$ | 53,715.00 |
| Par | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 3,412.00 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 3,369.00 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ır other sch | nedules. |
| 7. | ■ Yes What kind of debt do you have? | | |
| | | | |

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Page 9 of 48 Case number (if known) Debtor 1 Jeffrey J Whiting

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

8,046.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim | |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| | | | Document | Page 10 of 48 | | |
|----------------|-----------------------|------------------------------|--|---------------------------------|----------------------------|--|
| Fill in | this info | ormation to identify your | case and this filing: | | | |
| Debto | or 1 | Jeffrey J Whiting | 1 | | | |
| | | First Name | Middle Name | Last Name | | |
| Debto | or 2 e, if filing) | First Name | Middle Name | Last Name | | |
| (Spous | e, ii iiiiig) | riist name | Middle Name | Last Name | | |
| Unite | d States I | Bankruptcy Court for the: | NORTHERN DISTRICT OF IL | LINOIS | | |
| Case | number | | | | | ☐ Check if this is an |
| Ouse | Hamber | | | | | amended filing |
| | | | | | | 3 |
| ~ | | 4004/5 | | | | |
| Offi | <u>cial F</u> | orm 106A/B | | | | |
| Scl | hedu | ile A/B: Prop | pertv | | | 12/15 |
| | | | pe items. List an asset only once. | If an asset fits in more than o | ne category, list the asse | t in the category where you |
| | | | ate as possible. If two married peon a separate sheet to this form. On | | | |
| | r every qu | | i a separate sneet to this form. On | the top of any additional page | es, write your name and t | ase number (ii known). |
| Dort 4 | Decerib | ha Each Daoidenas Buildin | a Land or Other Book Estate Ver | Own or Hove on Interest In | | |
| Part 1 | Describ | De Each Residence, Buildin | g, Land, or Other Real Estate You | Own or have an interest in | | |
| 1. Do y | you own o | or have any legal or equitab | le interest in any residence, buildi | ng, land, or similar property? | | |
| | | | | | | |
| _ | No. Go to F | | | | | |
| Пλ | es. Where | e is the property? | | | | |
| Part 2 | Describ | be Your Vehicles | | | | |
| | | | | | | |
| | | | uitable interest in any vehicles | | | y vehicles you own that |
| some | one else d | drives. If you lease a vehic | cle, also report it on Schedule G | Executory Contracts and U | nexpired Leases. | |
| 3. Ca i | rs, vans, | trucks, tractors, sport u | tility vehicles, motorcycles | | | |
| _ | | | | | | |
| □ n | No | | | | | |
| | Yes | | | | | |
| | | | | | Do not doduct coours | d alaima ar avamatiana. Dut |
| 3.1 | Make: | Volkswagen | Who has an interest in | the property? Check one | | d claims or exemptions. Put cured claims on <i>Schedule D:</i> |
| | Model: | Passat | Debtor 1 only | | Creditors Who Have | Claims Secured by Property. |
| | Year: | 2017 | Debtor 2 only | | Current value of the | |
| | | nate mileage: | Debtor 1 and Debtor | | entire property? | portion you own? |
| 1 | Other into | ormation: | At least one of the de | ebtors and another | | |
| | | | ☐ Check if this is com | munity property | \$20,000.0 | 920,000.00 |
| | | | (see instructions) | initiality property | <u> </u> | |
| | , | | | | | |
| 4 18/- | | -: | TV d -4h | | | |
| | | , | ATVs and other recreational vesonal watercraft, fishing vessels, | | | |
| | | ,, | · · · · · · · · · · · · · · · · · · · | ,,, | | |
| | No | | | | | |
| | Yes | | | | | |
| | | | | | | |
| | | | | | _ | |
| 5 A d | d the do | llar value of the portion | you own for all of your entries | from Part 2, including an | y entries for | 400 000 00 |
| | | | . Write that number here | | | \$20,000.00 |
| | _ | | | | | |
| Part 3 | Describ | be Your Personal and Hous | sehold Items | | | |
| Do yo | ou own o | r have any legal or equi | table interest in any of the foll | owing items? | | Current value of the |
| | | | | | | portion you own? Do not deduct secured |
| | | | | | | claims or exemptions. |
| 0 11- | املمطممي | goods and furnishings | | | | • |

6. **Household goods and furnishings** *Examples:* Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

| Debtor 1 | Jeffrey J Whiting Document Page 11 of 48 Case number (if known) | Desc Main |
|---|--|---|
| _ | Describe | |
| – 165. | | \$500.0 4 |
| | Misc household goods and furniture | \$500.00 |
| □ No | nics les: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music control including cell phones, cameras, media players, games Describe | ollections; electronic devices |
| | Misc electronics | \$500.00 |
| Examp. | bles of value les: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, other collections, memorabilia, collectibles Describe | or baseball card collections; |
| Examp. ■ No | tent for sports and hobbies les: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes a musical instruments Describe | and kayaks; carpentry tools; |
| 10. Firear Exam | | |
| □ No | bles: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Describe | |
| | Misc clothing | \$400.00 |
| ■ No □ Yes. 13. Non-fa Exam No | bles: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, g Describe Irm animals bles: Dogs, cats, birds, horses Describe | old, silver |
| ■ No | ther personal and household items you did not already list, including any health aids you did not list Give specific information | |
| | the dollar value of all of your entries from Part 3, including any entries for pages you have attached art 3. Write that number here | \$1,400.00 |
| | escribe Your Financial Assets | |
| Do you o | vn or have any legal or equitable interest in any of the following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |

Official Form 106A/B Schedule A/B: Property page 2

| | | Case 16 | 39659 | Doc 1 | Filed 12/17/16 Document | Entered 12/17/16 10:49:00 | Desc Main |
|-----|---------------------------|---|--------------------------------------|------------------------------|---|---|--------------------------------|
| De | ebtor 1 | Jeffrey J W | hiting | | Document | Page 12 of 48 Case number (if known) | |
| 16. | □ No | | - | | our home, in a safe dep | osit box, and on hand when you file your petit | |
| | | | | | | MIsc cash on hand | \$100.00 |
| | | | | | l accounts; certificates occurs with the same ins | of deposit; shares in credit unions, brokerage titution, list each. | houses, and other similar |
| | | | | | Institution r | name: | |
| | | | 17.1. | | Chase Ba | ank Checking Account | \$1,000.00 |
| 18. | Examp ■ No | mutual funds les: Bond funds | s, investmer | | ith brokerage firms, mor | ney market accounts | |
| 19. | Non-pu | blicly traded s | | | | orporated businesses, including an interes | st in an LLC, partnership, and |
| | ■ No □ Yes. | Give specific ir | | bout them e of entity: | | % of ownership: | |
| 20. | Negotia Non-ne ■ No | able instrument | s include pe <i>nent</i> s are th | rsonal check ose you canr | negotiable and non-nous, cashiers' checks, pro not transfer to someone | egotiable instruments missory notes, and money orders. by signing or delivering them. | |
| 21. | <i>Examp</i> □ No | | n accounts IRA, ERISA | A, Keogh, 401 | I (k), 403(b), thrift saving | s accounts, or other pension or profit-sharing | plans |
| | ■ Yes. I | List each accou | | ly. account: | Institution r | name: | |
| | | | | | ATT 401k | plan | \$12,000.00 |
| 22. | Your st <i>Examp</i> | | ed deposits | you have ma | , , | tinue service or use from a company ctric, gas, water), telecommunications compa | nies, or others |
| | ■ No □ Yes | | | | Institution r | name or individual: | |
| 23. | Annuiti ■ No | es (A contract | for a periodi | c payment of | money to you, either fo | r life or for a number of years) | |
| | ☐ Yes | | | and descript | | | |
| 24. | | s in an educat C. §§ 530(b)(1), | | | n a qualified ABLE pro | ogram, or under a qualified state tuition pro | ogram. |
| | Yes | l | nstitution na | me and desc | ription. Separately file the | ne records of any interests.11 U.S.C. § 521(c) | : |
| 25. | ■ No | • | | | rty (other than anythir | g listed in line 1), and rights or powers ex | ercisable for your benefit |
| | ☐ Yes. | Give specific in | formation a | bout them | | | |

| Debtor 1 Jeffrey J Whiting | Document | Page 13 of 48 Case number (if known) | |
|---|--------------------------|---|--|
| 26. Patents, copyrights, trademarks, trade secrets Examples: Internet domain names, websites, pro | | | |
| ■ No □ Yes. Give specific information about them | occus irom royumos a | na locationing agreements | |
| 27. Licenses, franchises, and other general intang | | | |
| Examples: Building permits, exclusive licenses, o ■ No | cooperative association | n holdings, liquor licenses, professional license | es |
| ☐ Yes. Give specific information about them | | | |
| Money or property owed to you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. Tax refunds owed to you ■ No | | | |
| Yes. Give specific information about them, inclu | uding whether you alre | ady filed the returns and the tax years | |
| 29. Family support <i>Examples</i> : Past due or lump sum alimony, spous | sal support, child suppo | ort, maintenance, divorce settlement, property | settlement |
| ■ No □ Yes. Give specific information | | | |
| 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance pa | ayments, disability ben | efits, sick pay, vacation pay, workers' comper | nsation, Social Security |
| benefits; unpaid loans you made to s ■ No □ Yes. Give specific information | omeone else | | |
| 31. Interests in insurance policies | | | |
| Examples: Health, disability, or life insurance; he ■ No | ealth savings account (l | HSA); credit, homeowner's, or renter's insuran | nce |
| ☐ Yes. Name the insurance company of each pol Company name: | licy and list its value. | Beneficiary: | Surrender or refund value: |
| 32. Any interest in property that is due you from some lf you are the beneficiary of a living trust, expect someone has died. | | | eive property because |
| ☐ Yes. Give specific information | | | |
| 33. Claims against third parties, whether or not you Examples: Accidents, employment disputes, insu ■ No | | | |
| ☐ Yes. Describe each claim | | | |
| 34. Other contingent and unliquidated claims of e ■ No - | every nature, including | g counterclaims of the debtor and rights to | set off claims |
| ☐ Yes. Describe each claim | | | |
| 35. Any financial assets you did not already list ■ No | | | |
| ☐ Yes. Give specific information | | | |
| 36. Add the dollar value of all of your entries fro for Part 4. Write that number here | | | \$13,100.00 |

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

Official Form 106A/B Schedule A/B: Property page 4

| Debt | tor 1 | Case 16-39659 Jeffrey J Whiting | Doc 1 | Filed 12/17/16 Document | Entered 12 Page 14 of | 2/17/16 10:49:00 48 Case number (if known) | Desc Main | |
|--------------|---------------------|----------------------------------|---------------------|-----------------------------|--------------------------|--|----------------------|-----|
| 37. D | o you d | own or have any legal or equ | itable interest | in any business-related p | roperty? | | | |
| | No. Go | to Part 6. | | | | | | |
| | Yes. G | So to line 38. | | | | | | |
| Part (| | scribe Any Farm- and Comm | | | n or Have an Interes | st In. | | |
| | II y | ou own or have an interest in i | armiano, list it ir | TPail I. | | | | |
| 46. D | Oo you | ı own or have any legal o | r equitable in | terest in any farm- or | commercial fishin | g-related property? | | |
| | No. | Go to Part 7. | | | | | | |
| I | ☐ Yes | . Go to line 47. | | | | | | |
| Part 1 | 7. | Describe All Property You | Own or Hove | on Interest in That You Di | d Not List Above | | | |
| rait | ۲. | Describe All Froperty Tou | Own or mave a | an interest in That Tou Die | I NOT LIST ADOVE | | | |
| | | have other property of a | | | | | | |
| | <i>Examp</i> INo | oles: Season tickets, countr | ry club membe | ersnip | | | | |
| | | Give specific information | | | | | | |
| | 1 103. | Oive specific information | | | | | | |
| 54. | Add t | he dollar value of all of y | our entries fr | om Part 7. Write that n | umber here | | \$0.00 |) |
| | | | | | | | | _ |
| Part 8 | 8: | List the Totals of Each Part | of this Form | | | | | |
| 55. | Part 1 | 1: Total real estate, line 2 | | | | | \$0. | .00 |
| | | 2: Total vehicles, line 5 | | | \$20,000.00 | | | |
| 57. | Part 3 | 3: Total personal and hou | sehold items | s, line 15 | \$1,400.00 | | | |
| 58. | Part 4 | 4: Total financial assets, I | line 36 | | \$13,100.00 | | | |
| 59. | Part 5 | 5: Total business-related | property, line | = 45 | \$0.00 | | | |
| 60. | Part 6 | 6: Total farm- and fishing | -related prop | erty, line 52 | \$0.00 | | | |
| 61. | Part 7 | 7: Total other property no | t listed, line | 54 + | \$0.00 | | | |
| 62. | Total | personal property. Add li | nes 56 throug | h 61 | \$34,500.00 | Copy personal property to | otal \$34,500 | .00 |

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$34,500.00

| Fill in this information to identify your case: |
|---|
| This in this information to identify your case. |
| Debtor 1 Jeffrey J Whiting |
| First Name Middle Name Last Name |
| Debtor 2 |
| (Spouse if, filing) First Name Middle Name Last Name |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS |
| Case number |
| (if known) |
| |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| 1. Which set of exemptions are you claiming? Check one | e only, even if your spouse is filing with you. |
|--|---|
|--|---|

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | | Specific laws that allow exemption |
|--|---|-----------------------------------|---|------------------------------------|
| | Copy the value from Schedule A/B | Chec | ck only one box for each exemption. | |
| 2017 Volkswagen Passat Line from Schedule A/B: 3.1 | \$20,000.00 | | \$0.00 | 735 ILCS 5/12-1001(b) |
| Line from Generalic Arb. G.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Misc household goods and furniture Line from Schedule A/B: 6.1 | \$500.00 | | \$500.00 | 735 ILCS 5/12-1001(b) |
| Line nom Schedule A.B. V.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Misc electronics Line from Schedule A/B: 7.1 | \$500.00 | | \$500.00 | 735 ILCS 5/12-1001(b) |
| Line nom Schedule A.B. 1.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Misc clothing Line from Schedule A/B: 11.1 | \$400.00 | | \$400.00 | 735 ILCS 5/12-1001(a) |
| Line Holl Schedule A.D. 11.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| MIsc cash on hand Line from Schedule A/B: 16.1 | \$100.00 | | \$100.00 | 735 ILCS 5/12-1001(b) |
| Line nom Schedule A/D. 10.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | | | | |

Entered 12/17/16 10:49:00 Document Page 16 of 48 Debtor 1 Jeffrey J Whiting Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Chase Bank Checking Account** 735 ILCS 5/12-1001(b) \$1,000.00 \$1,000.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit ATT 401k plan 735 ILCS 5/12-1006 \$12,000.00 \$12,000.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

Filed 12/17/16

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Case 16-39659

No

Yes

Doc 1

Desc Main

| Ca | ise 16-39659 | Doc 1 Filed 12/17/16 Document | Entered Page 17 | 12/17/16 10: of 48 | 49:00 Desc N | ⁄lain |
|--|------------------------------|--|--------------------|--|--------------------------|-------------------|
| Fill in this inforn | nation to identify you | | Paue 17 | UI 40 | | |
| | | | | | | |
| Debtor 1 | Jeffrey J Whiting | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Ba | nkruptcy Court for the: | NORTHERN DISTRICT OF ILLI | NOIS | | | |
| Case number | | | | | | |
| (if known) | | | | | ☐ Check | t if this is an |
| | | | | | amend | ded filing |
| Official Form | 106D | | | | | |
| Official Forn | | | | | | |
| schedule | D: Creditors | Who Have Claims S | secured | by Propert | У | 12/15 |
| | | two married people are filing togethe | | | | |
| s needed, copy the number (if known). | e Additional Page, till it d | ut, number the entries, and attach it to | this form. On t | the top of any addition | nai pages, write your na | me and case |
| . Do any creditors | have claims secured by | your property? | | | | |
| ☐ No. Check | this box and submit th | is form to the court with your other s | schedules. You | u have nothing else t | o report on this form. | |
| Yes. Fill in | all of the information b | pelow. | | | | |
| | II Secured Claims | | | | | |
| | | sere there are accurred alone list the ared | liter concretely | Column A | Column B | Column C |
| for each claim. If m | ore than one creditor has | nore than one secured claim, list the cred a particular claim, list the other creditors | in Part 2. As | Amount of claim | Value of collateral | Unsecured |
| much as possible, li | ist the claims in alphabetic | al order according to the creditor's name | | Do not deduct the value of collateral. | that supports this claim | portion If any |
| 2.1 Ally | | Describe the property that secures th | ne claim: | \$22,829.00 | \$20,000.00 | \$2,829.00 |
| Creditor's Name | е | 2017 Volkswagen Passat | | | | |
| | | | | | | |
| PO Box 3 | 80001 | As of the date you file, the claim is: C | heck all that | | | |
| | olis, MN 55438 | apply. Contingent | | | | |
| | , City, State & Zip Code | ☐ Unliquidated | | | | |
| , | , - ,, , | ☐ Disputed | | | | |
| Who owes the de | ebt? Check one. | Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | | ■ An agreement you made (such as m | nortgage or secur | red | | |
| Debtor 2 only | | car loan) | | | | |
| Debtor 1 and De | ebtor 2 only | ☐ Statutory lien (such as tax lien, mech | nanic's lien) | | | |
| ☐ At least one of the | he debtors and another | ☐ Judgment lien from a lawsuit | | | | |
| ☐ Check if this cl community de | | ☐ Other (including a right to offset) _ | | | | |
| Date debt was inc | urred | Last 4 digits of account number | er <u>9498</u> | | | |
| | | | | | | |
| Add the dollar va | alue of your entries in Co | olumn A on this page. Write that numb | er here: | \$22,82 | 9.00 | |
| If this is the last | page of your form, add t | he dollar value totals from all pages. | | \$22,82 | | |
| Write that number | er nere: | | | +==,0= | | |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| Fill in this informa | ation to identify your o | case: | DOCUMENT P | aue to ura | 40 | | |
|--|---|--|--|--|---|--|--|
| Debtor 1 | Jeffrey J Whiting | | | | | | |
| | First Name | Middl | e Name Las | st Name | | | |
| Debtor 2 (Spouse if, filing) | First Name | Middl | e Name Las | st Name | | | |
| United States Bank | cruptcy Court for the: | NORTHE | RN DISTRICT OF ILLINO | IS | | | |
| | | | | | | | |
| Case number | | | | | | _ | if this is an ed filing |
| Official Form | | | | | | | |
| Schedule E/ | F: Creditors W | ho Hav | re Unsecured Cla | aims | | | 12/15 |
| ny executory contra schedule G: Executo schedule D: Creditor | ncts or unexpired leases bry Contracts and Unexp is Who Have Claims Sec nuation Page to this pag | that could r ired Leases ured by Pro | creditors with PRIORITY cla esult in a claim. Also list ex (Official Form 106G). Do no perty. If more space is need we no information to report in | ecutory contract t include any cre ed, copy the Part | ts on Schedule A/B: F editors with partially s t you need, fill it out, i | roperty (Official For ecured claims that a number the entries ir | m 106A/B) and on re listed in the boxes on the |
| | of Your PRIORITY Un | | | | | | |
| | s have priority unsecure | d claims aga | ainst you? | | | | |
| □ No. Go to Par | 1 2. | | | | | | |
| identify what type possible, list the | e of claim it is. If a claim ha claims in alphabetical orde | s both prioriter according | r has more than one priority ur ty and nonpriority amounts, list to the creditor's name. If you h t, list the other creditors in Pari | t that claim here a nave more than tw | and show both priority a | nd nonpriority amount | s. As much as |
| | • | | ictions for this form in the instr | | | | |
| (| , | | | , | Total claim | Priority amount | Nonpriority amount |
| 2.1 Ellen Wh | iting | | Last 4 digits of account nu | mber | Unknown | Unknown | Unknown |
| Priority Cred | litor's Name | | When was the debt incurre | ed? 12/3/20 | 154 | | |
| Number Stre | eet City State Zlp Code | | As of the date you file, the | claim is: Check a | all that apply | | |
| Who incurred t | the debt? Check one. | | ☐ Contingent | | , | | |
| Debtor 1 onl | ly | | ☐ Unliquidated | | | | |
| Debtor 2 onl | ly | | ☐ Disputed | | | | |
| Debtor 1 and | d Debtor 2 only | | Type of PRIORITY unsecur | ed claim: | | | |
| ☐ At least one | of the debtors and anothe | er | ■ Domestic support obligati | ions | | | |
| | s claim is for a commur | nity debt | Taxes and certain other of | • | • | | |
| _ | bject to offset? | | ☐ Claims for death or perso | onal injury while yo | ou were intoxicated | | |
| ■ No □ Yes | | | Other. Specify | Support | | | |
| | | | - Jima | Сирроп | | | |
| | Revenue Service | | Last 4 digits of account nu | mber | \$0.00 | \$0.00 | \$0.00 |
| Priority Cred PO Box 2 | | | When was the debt incurre | ed? | | | |
| Philadelp | hia, PA 19114 | | | | | - | |
| | eet City State Zlp Code the debt? Check one. | | As of the date you file, the | claim is: Check a | all that apply | | |
| ■ Debtor 1 onl | | | ☐ Contingent | | | | |
| ■ Debtor 1 onl | | | ☐ Unliquidated | | | | |
| | • | | ☐ Disputed Type of PRIORITY unsecur | ed claim· | | | |
| ☐ Debtor 1 and | • | | Domestic support obligati | | | | |
| | of the debtors and anothe | | - | | | | |
| | s claim is for a commur bject to offset? | nity debt | ■ Taxes and certain other of Claims for death or person | - | - | | |
| ■ No | - | | Other. Specify | | | | |
| ☐ Yes | | | | e tax debt+ | | | |

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Page 19 of 48 Case number (if know) Document Debtor 1 Jeffrey J Whiting

| Pa | t 2: List All of Your NONPRIORITY Unsecu | red Claims | | | | | | | | |
|-----|---|--|---|---------------------------|--|--|--|--|--|--|
| 3. | 3. Do any creditors have nonpriority unsecured claims against you? | | | | | | | | | |
| | \square No. You have nothing to report in this part. Submit | this form to the court with your other sch | edules. | | | | | | | |
| | ■ Yes. | | | | | | | | | |
| 4. | List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2. | aim. For each claim listed, identify what | type of claim it is. Do not list claims already inc | cluded in Part 1. If more | | | | | | |
| | | | | Total claim | | | | | | |
| | Advanced Family | | | | | | | | | |
| 4.1 | Dental/Shorewood | Last 4 digits of account number | 1394 | \$252.00 | | | | | | |
| | Nonpriority Creditor's Name Creditors Discount & Audit Co 415 E. Main Street Streator, IL 61364 | When was the debt incurred? | | - | | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | | | | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | | | | |
| | ■ No | <u></u> | Debts to pension or profit-sharing plans, and other similar debts | | | | | | | |
| | Yes | Other. Specify Dental bill | | _ | | | | | | |
| | American General | | | | | | | | | |
| 4.2 | Financial/Springleaf Fi | Last 4 digits of account number | 6868 | \$7,903.00 | | | | | | |
| | Nonpriority Creditor's Name Springleaf Financial/Attn: Bankruptcy De | When was the debt incurred? | Opened 08/16 Last Active 9/15/16 | - | | | | | | |
| | Po Box 3251 Evansville, IN 47731 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | | | | |
| | ☐ Check if this claim is for a community | | | | | | | | | |
| | debt Is the claim subject to offset? | | | | | | | | | |
| | ■ No | Debts to pension or profit-sharing | | | | | | | | |
| | Yes | Other. Specify Note Loan | | | | | | | | |

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Case number (if know)

| Debtor | 1 Jeffrey J Whiting | —————————————————————————————————————— | Case number (if know) | | |
|--------|---|---|--|------------|--|
| 4.3 | Bank of New York Mellon Trust Nonpriority Creditor's Name | Last 4 digits of account number | | \$0.00 | |
| | Potestivo & Associates PC 223 West Jackson, Ste 610 Chicago, IL 60606 | When was the debt incurred? | | | |
| = | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | lacksquare At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | | |
| | No | Debts to pension or profit-sharin | g plans, and other similar debts | | |
| | Yes | ■ Other. Specify (Case no 1 | liability for prior mortgage 5 CH 2599) | | |
| 4.4 | Barclays Bank Delaware Nonpriority Creditor's Name | Last 4 digits of account number | 4402 | \$1,968.00 | |
| | Po Box 8801 Wilmington, DE 19899 | When was the debt incurred? | Opened 07/15 Last Active 10/07/16 | | |
| - | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | | | |
| | ■ No | Debts to pension or profit-sharin | | | |
| | Yes | Other. Specify Credit Card | | | |
| 4.5 | Capital One | Last 4 digits of account number | 4340 | \$564.00 | |
| | Po Box 30285 Salt Lake City, UT 84130 | When was the debt incurred? | Opened 06/09 Last Active 10/16 | | |
| - | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans☐ Obligations arising out of a sepa | | | |
| | Is the claim subject to offset? | report as priority claims | | | |
| | ■ No | Debts to pension or profit-sharing | | | |
| | Yes | ■ Other. Specify Credit Card | | | |

Document Page 21 of 48 Debtor 1 Jeffrey J Whiting Case number (if know) 4.6 \$1,532.00 Capital One Last 4 digits of account number 4778 Nonpriority Creditor's Name Opened 06/10 Last Active Po Box 30285 When was the debt incurred? 10/16 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card 4.7 **Capital One Auto Finance** 1001 Last 4 digits of account number \$16,751.00 Nonpriority Creditor's Name Attn: Bankruptcy Dept Opened 07/14 Last Active Po Box 30258 When was the debt incurred? 9/21/16 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Automobile Other, Specify 4.8 Collection Prof/lasalle Last 4 digits of account number 7222 \$540.00 Nonpriority Creditor's Name Po Box 416 When was the debt incurred? **Opened 01/13** La Salle, IL 61301 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

Official Form 106 E/F

debt

■ No

☐ Yes

Is the claim subject to offset?

report as priority claims

Other. Specify Resear

☐ Obligations arising out of a separation agreement or divorce that you did not

Collection Attorney Joliet Cntr. Clinical

☐ Debts to pension or profit-sharing plans, and other similar debts

Page 22 of 48 Case number (if know) Document Debtor 1 Jeffrey J Whiting 4.9 \$62.00 Comenitycapital/gmstop Last 4 digits of account number 7705 Nonpriority Creditor's Name **Comenity Bank** Opened 11/15 Last Active Po Box 182125 When was the debt incurred? 10/11/16 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.1 Credit First/CFNA 3695 \$829.00 Last 4 digits of account number Nonpriority Creditor's Name **Bk13 Credit Operations** Opened 10/11/12 Last Active Po Box 818011 When was the debt incurred? 10/11/16 Cleveland, OH 44181 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Charge Account 4.1 Kohls/Capital One 0487 \$185.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 08/16 Last Active Po Box 3120 When was the debt incurred? 10/11/16 Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed

☐ Yes

■ No

Type of NONPRIORITY unsecured claim:

☐ Obligations arising out of a separation agreement or divorce that you did not

lacksquare Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

☐ At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community

Case 16-39659 Doc 1 Filed 12/17/16 Entered 12/17/16 10:49:00 Desc Main Document Page 23 of 48 Debtor 1 Jeffrey J Whiting Case number (if know) 4.1 Kohls/Capital One 8203 Unknown Last 4 digits of account number 2 Nonpriority Creditor's Name Opened 12/10 Last Active Po Box 3120 When was the debt incurred? 09/15 Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes **Merchants Credit** 0435 \$300.00 Last 4 digits of account number Nonpriority Creditor's Name 223 W Jackson Blvd Opened 06/16 Last Active Ste 700 When was the debt incurred? 01/15 Chicago, IL 60606 As of the date you file, the claim is: Check all that apply Number Street City State ZIp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Edward Hospital ☐ Yes 4.1 **Ocwen Loan Servicing** \$0.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 785061 When was the debt incurred? Orlando, FL 32878-5063 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Any and all liability arising out of mortgage ☐ Yes Other Specify (Case no 15 CH 2599)

Page 24 of 48 Case number (if know) Debtor 1 Jeffrey J Whiting

| 1 5 | Synchrony Bank/Walmart | Last 4 digits of account number | 3748 | Unknown | | |
|-----|---|--|--|---------|--|--|
| | Nonpriority Creditor's Name | | Opened 8/29/08 Last Active | | | |
| - | Orlando, FL 32896 | When was the debt incurred? | 01/14 | | | |
| N | Number Street City State Zlp Code | As of the date you file, the claim i | | | | |
| ٧ | Vho incurred the debt? Check one. | | | | | |
| I | Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | |
| | Check if this claim is for a community | ☐ Student loans | | | | |
| d | lebt s the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | |
| | No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | | | |
| [| Yes | Other. Specify Charge Acc | count | | | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|-----|---|--|---|---|
| 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| | | | - | |
| 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | | | | |
| 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | | |
| | | | | Total Claim |
| 6f. | Student loans | 6f. | \$ | 0.00 |
| | | | | |
| 6g. | Obligations arising out of a separation agreement or divorce that | 60 | ¢ | 0.00 |
| 6h | | - | · | |
| | | | Φ | 0.00 |
| OI. | here. | OI. | \$ | 30,886.00 |
| 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 30,886.00 |
| | 6b. 6c. 6d. 6e. 6f. 6g. 6h. 6i. | 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 6e. Total Priority. Add lines 6a through 6d. 6e. 6f. Student loans 6f. 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 6d. 6d. 6d. 6d. 6d. 6e. | 6a. Domestic support obligations 6a. \$ 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. \$ 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$ 6e. Total Priority. Add lines 6a through 6d. 6e. \$ 6f. Student loans 6f. \$ 6g. \$ 6h. Debts to pension or profit-sharing plans, and other similar debts 6h. \$ 6c. \$ 6d. \$ |

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

| | | 1700.000 | III FAUE 7.3 UI 40 | |
|---------------------|--------------------------|-------------------|--------------------|--|
| Fill in this infor | rmation to identify your | case: | | |
| Debtor 1 | Jeffrey J Whiting | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States B | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company wit | h whom you have the er, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|-------------|---|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.3 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.4 | • | | | | |
| | Name | | | | |
| | Number | Street | | | - |
| | City | | State | ZIP Code | |
| 2.5 | | | · | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| | , | | 0. | | |

| | | Docume | ent Page 26 d | NT 48 | |
|--------------------------------|---|--|---------------------------|---|--|
| Fill in this i | information to identify your | | | | |
| Debtor 1 | Jeffrey J Whiting | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing | g) First Name | Middle Name | Last Name | | |
| | | | | | |
| United State | es Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case numb | er | | | | |
| (if known) | | | | | Check if this is an amended filing |
| | | | | | amonada ming |
| Official | Form 106H | | | | |
| Sched | ule H: Your Cod | ebtors | | | 12/15 |
| | | | | | |
| fill it out, an your name | nd number the entries in the and case number (if known) | boxes on the left. Attach . Answer every question | n the Additional Page t | o this page. On the top of | ded, copy the Additional Page, f any Additional Pages, write |
| 1. Do y | ou have any codebtors? (If | you are filing a joint case, | do not list either spouse | as a codebtor. | |
| ■ No □ Yes | | | | | |
| 2. With | in the last 8 years, have you | lived in a community pr | operty state or territor | v? (Community property st | tates and territories include |
| | a, California, Idaho, Louisiana | | | | atos ana tormonos morado |
| ■ No. 4 | Go to line 3. | | | | |
| | Did your spouse, former spo | use, or legal equivalent live | e with you at the time? | | |
| | Zia year epeace, ieiiiiei epe | acc, c. logal equitalent iiv | o man you at ano anno i | | |
| in line Form 1 | 2 again as a codebtor only i | f that person is a guaran | tor or cosigner. Make | sure you have listed the | rith you. List the person shown creditor on Schedule D (Official hedule E/F, or Schedule G to fill |
| | Column 1: Your codebtor ame, Number, Street, City, State and Z | P Code | | Column 2: The credit Check all schedules t | or to whom you owe the debt hat apply: |
| 3.1 | | | | ☐ Schedule D, line | |
| | lame | | | □ Schedule E/F, line | |
| | | | | ☐ Schedule G, line | |
| N | lumber Street | | | | |
| C | City | State | ZIP Code | | |
| 3.2 | | | | ☐ Schedule D, line | |
| | lame | | | ☐ Schedule E/F, line | |
| | | | | ☐ Schedule G, line | |
| | lumber Street | | | _ | |
| C | City | State | ZIP Code | | |

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| Fill | in this information to identify your ca | ase: | | | | | |
|--------------------|---|-------------------------------|--|---------------|---------------------------|---|---------------------------------|
| Del | btor 1 Jeffrey J Wh | niting | | | | | |
| | btor 2 puse, if filing) | | | | | | |
| Uni | ited States Bankruptcy Court for the | : NORTHERN DISTRIC | CT OF ILLINOIS | | | | |
| (If kr | fficial Form 106l | | - | | | ed filing ent showing pos as of the followi | C |
| | chedule I: Your Inc | | onle are filing together (Debtor | l and Deb | ntor 2) ho | th are equally i | 12/15 |
| sup spo atta | plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment | are married and not filing wi | ng jointly, and your spouse is li ith you, do not include informa | ving with | you, inclut t your spo | ude informatio ouse. If more s | n about your pace is needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | Debtor 2 | or non-filing s | spouse |
| | If you have more than one job, | Employment status | ■ Employed | | ☐ Emplo | oyed | |
| | attach a separate page with information about additional | | ☐ Not employed | | ☐ Not e | mployed | |
| | employers. | Occupation | Development Coach | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | ATT/Illinois Bell | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 225 West Randolph Chicago, IL 60606 | | | | |
| | | How long employed to | here? 16 years | | _ | | |
| Pai | rt 2: Give Details About Mor | nthly Income | | | | | |
| | mate monthly income as of the duse unless you are separated. | ate you file this form. If | you have nothing to report for any | / line, write | e \$0 in the | space. Include | your non-filing |
| | ou or your non-filing spouse have mo e space, attach a separate sheet to | | ombine the information for all emp | loyers for | that perso | on on the lines b | elow. If you need |
| | | | | For De | btor 1 | For Debtor 2 non-filing sp | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | | 3,140.00 | \$ | N/A |
| 3. | Estimate and list monthly overt | ime pay. | 3. + | . | 0.00 | +\$ | N/A |

Calculate gross Income. Add line 2 + line 3.

8,140.00

N/A

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| Deb | otor 1 | Jeffrey J Whiting | - | (| Case | number (if kn | own) | | | | |
|-----|-----------------------------|---|----------|-----------|-------------|---------------|------|-------|------------------|-------------------|----------------|
| | | | | | | Debtor 1 | | non-f | ebtor iling s | spouse | |
| | Cop | by line 4 here | 4. | | \$_ | 8,140 | .00 | \$ | | N/A | |
| 5. | List | all payroll deductions: | | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 58 | a. | \$ | 2,286 | .00 | \$ | | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b | ٥. | \$_ | 0 | .00 | \$ | | N/A | |
| | 5c. | Voluntary contributions for retirement plans | 50 | | \$_ | 240 | | \$ | | N/A | |
| | 5d. | Required repayments of retirement fund loans | 50 | | \$_ | | .00 | \$ | | N/A | |
| | 5e. | Insurance | 5e | | \$_ | 306 | | \$ | | N/A | |
| | 5f. 5g. | Domestic support obligations Union dues | 5f 5g | | \$ \$ | 1,750 | .00 | \$ | | N/A N/A | |
| | 5g. 5h. | Other deductions. Specify: Misc | | y. า.+ | \$ - | | | + \$ | | N/A N/A | |
| 6 | | · · · · | _ | | * \$ | | | · • | | | |
| 6. | | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | · — | 4,728 | | · — | | N/A | |
| 7. | | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$ _ | 3,412 | .00 | \$ | | N/A | |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 88 | a | \$ | 0 | .00 | \$ | | N/A | |
| | 8b. | Interest and dividends | 8b | | \$ - | | .00 | \$ | | N/A | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 80 | С. | \$ | | .00 | \$ | | N/A | |
| | 8d. | Unemployment compensation | 80 | d. | \$_ | 0 | .00 | \$ | | N/A | |
| | 8e. | Social Security | 86 | Э. | \$_ | 0 | .00 | \$ | | N/A | |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f | | \$_ | | .00 | \$ | | N/A | |
| | 8g. | Pension or retirement income | 80 | - | \$_ | | .00 | \$ | | N/A | |
| | 8h. | Other monthly income. Specify: | _ 8r | Դ.+ | \$_ | 0 | .00 | + \$ | | N/A | |
| 9. | Add | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | . 9 | <u> </u> | 0 | .00 | \$ | | N/A | A |
| 10 | Cal | culate monthly income. Add line 7 + line 9. | 10. | \$ | | 3,412.00 | + \$ | | N/A | = \$ | 3,412.00 |
| | | I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | *- | | 3,412.00 | - | | 14/7 | | 3,412.00 |
| 11. | Star Incli othe Do | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify: | dep | | | , , | | , | hedule | | 0.00 |
| 12. | | If the amount in the last column of line 10 to the amount in line 11. The rester that amount on the Summary of Schedules and Statistical Summary of Certain lies | | | | | | | 12. | \$ | 3,412.00 |
| 13. | Do : | you expect an increase or decrease within the year after you file this form' | ? | | | | | | | Combin monthly | ed / income |
| | _ | Van Frankin | | | | | | | | | |

Official Form 106I Schedule I: Your Income page 2

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| Fill | in this informa | tion to identify yo | our case: | | | ı | | | |
|-------------------|--|---|--|--|--|--------------------------------|------------------------|------------------------------|---|
| | | | | | | Ch | ook if thio | ia. | |
| Den | tor 1 | Jeffrey J Wh | iting | | | | neck if this An ame | nded filing | |
| | tor 2 | | | | | | A suppl | ement shov | ving postpetition chapter |
| (Spo | ouse, if filing) | | | | | | 13 expe | enses as of | the following date: |
| Unit | ed States Bankr | ruptcy Court for the | : NORTH | IERN DISTRICT OF ILLI | NOIS | | MM / D | D / YYYY | |
| 1 | e number | | | | | | | | |
| (If k | nown) | | | | | | | | |
| O | fficial Fo | rm 106J | | | | | | | |
| S | chedule | J: Your | Exper | ses | | | | | 12/1 |
| Be info nur | as complete a ormation. If m mber (if know | and accurate as ore space is ne n). Answer ever | s possible. eded, atta ry question | If two married people ch another sheet to thi | | | | | |
| Par 1. | t 1: Descr Is this a joir | ibe Your House | hold | | | | | | |
| | No. Go to | | | | | | | | |
| | _ | | in a separ | ate household? | | | | | |
| | □N | 0 | | | | | | | |
| | □ Y | es. Debtor 2 mus | st file Offici | al Form 106J-2, <i>Expens</i> | es for Separate House | ehold of D | ebtor 2. | | |
| 2. | Do you have | e dependents? | □ No | | | | | | |
| | Do not list Do Debtor 2. | ebtor 1 and | Yes. | Fill out this information for each dependent | Dependent's relat Debtor 1 or Debto | | Dep age | endent's | Does dependent live with you? |
| | Do not state | the | | | | | | | ■ No |
| | dependents | names. | | | Son | | 12 | | ☐ Yes |
| | | | | | Son | | 14 | | ■ No |
| | | | | | 3011 | | | | ☐ Yes |
| | | | | | Daughter | | 16 | | ■ No □ Yes |
| | | | | | | | | | □ No |
| | | | | | | | | | ☐ Yes |
| 3. | expenses of | penses include f people other t d your depende | han 👝 | No Yes | | | | | |
| Est | imate your ex | ate Your Ongoi openses as of your openate after the l | our bankrı | uptcy filing date unless | you are using this footnesses | orm as a e <i>J</i> , check | suppleme the box a | ent in a Cha at the top o | apter 13 case to report f the form and fill in the |
| the | | n assistance an | | government assistance luded it on <i>Schedule I</i> . | | | | Your exp | enses |
| • | | • | | | | _ | | | |
| 4. | | or home owners and any rent for the | | ses for your residence r lot. | Include first mortgag | e 4. | \$ | | 1,400.00 |
| | If not includ | led in line 4: | | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. | \$ | | 0.00 |
| | | rty, homeowner's | | | | 4b. | | | 0.00 |
| | | | | ipkeep expenses | | 4c. | · : —— | | 50.00 |
| 5 | | owner's associat | | dominium dues o ur residence. such as l | nome equity loans | 4d. 5 | \$ \$ | | 0.00 |

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| 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 3,412.00 23b. Copy your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. \$ 43.00 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? | Deb | tor 1 | Jeffrey J | Whiting | Case n | umb | per (if known) | |
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| 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6b. \$ 40,00 6c. Telephone, cell phone, internet, satellite, and cable services 6c. \$ 215,00 6d. Other. Specify: 6d. \$ 0,00 7. Food and housekeeping supplies 7. \$ 400,00 7. Food and housekeeping supplies 8. \$ 0,00 8. Childcare and children's education costs 8. \$ 0,00 9. Clothing, laundry, and dry cleaning 9. \$ 0,00 10. Personal care products and services 10. \$ 0,00 11. Personal care products and services 11. \$ 0,00 11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare. 12. Transportation. Include gas, maintenance, bus or train fare. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0,00 15. Insurance. 16. Charitable contributions and religious donations 17. Life insurance deducted from your pay or included in lines 4 or 20. 17. Life insurance 18. \$ 0,00 18. Life insurance deducted from your pay or included in lines 4 or 20. 18. Life insurance 19. \$ 0,00 19. Personal case spayments 19. \$ 0,00 19. Personal case payments 19. \$ 0,00 19. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 19. Specify: IRS 10. \$ 150,00 19. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 19. Specify: IRS 10. \$ 150,00 19. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 19. Specify: IRS 10. \$ 150,00 19. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 19. Specify: IRS 10. \$ 150,00 19. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 19. Personal for Vehicle 2 170. Cher. Specify: 170. Cher. Specify: 171. Car payments for Vehicle 2 172. Carpayments for Vehicle 2 173. Carpayments for Vehicle 2 174. \$ 0,00 175. Other. Specify: 175. Other. Specify: 176. S 0,00 177. Other. Specify: 177. Carpayments for Vehicle 2 178. S 0,00 179. Other specify: 190. Other payments for Vehicle 2 190. Nortigages on other property expenses not included in lines 4 or 5 o | 6. | Utiliti | ies: | | | | | |
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| Fill in this info | ormation to identify your o | ase: | | | |
|----------------------------------|---|-------------------------|---|------------------------|--|
| Debtor 1 | Jeffrey J Whiting | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States E | Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number (if known) | | | | | ☐ Check if this is an amended filing |
| Official Fo | rm 106Dec | | | | |
| Declara | tion About a | n Individual | Debtor's Sc | hedules | 12/15 |
| obtaining mon years, or both. | | connection with a bank | | | ment, concealing property, or 0, or imprisonment for up to 20 |
| Did you p | pay or agree to pay some | one who is NOT an attor | ney to help you fill out b | ankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. | Name of person | | | | cruptcy Petition Preparer's Notice, and Signature (Official Form 119) |
| that they a | nalty of perjury, I declare tare true and correct. Iffrey J Whiting Y J Whiting | hat I have read the sum | mary and schedules filed X Signature of | d with this declaratio | , |
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Date _____

Date December 7, 2016

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|-----------------|---|--|------------------------------------|-------------------------------------|--------------------------------------|
| Debto | r 1 Jeffrey J Whit | Middle Name | Last Name | | |
| Debto | | ACT III A | | | |
| | if, filing) First Name | Middle Name | Last Name | | |
| United | States Bankruptcy Court for the | ne: NORTHERN DISTRICT C | OF ILLINOIS | | |
| Case i | number n) | | | | Check if this is an mended filing |
| Stat | | Il Affairs for Individ | | | 4/16 |
| inform numbe | ation. If more space is needer er (if known). Answer every q | Marital Status and Where You | this form. On the top of any | | |
| | l Married | | | | |
| | Not married | | | | |
| 2. Di | uring the last 3 years, have v | ou lived anywhere other than v | where you live now? | | |
| | | , | | | |
| | | ou lived in the last 3 years. Do no | ot include where you live now | 1 | |
| | • • | · | , | | D D |
| L | Debtor 1 Prior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| | 804 Mandan Village Drive Plainfield, IL | From-To: | ☐ Same as Debtor | | ☐ Same as Debtor 1 From-To: |
| | and territories include Árizona, No Yes. Make sure you fill out s | ever live with a spouse or leg California, Idaho, Louisiana, New Schedule H: Your Codebtors (Of Your Income | vada, New Mexico, Puerto R | | |
| Fi | Il in the total amount of income you are filing a joint case and y | employment or from operatin you received from all jobs and a rou have income that you receive | all businesses, including part- | time activities. | ndar years? |
| _ | . 30. i iii iii alo dotaiio. | Dahitan 4 | | Dalatan 0 | |
| | | Debtor 1 Sources of income | Gross income | Debtor 2 Sources of income | Gross income |
| | | Check all that apply. | (before deductions and exclusions) | Check all that apply. | (before deductions and exclusions) |
| | January 1 of current year untage ate you filed for bankruptcy: | til ■ Wages, commissions, bonuses, tips | \$102,070.00 | ☐ Wages, commissions, bonuses, tips | |
| | | ☐ Operating a business | | ☐ Operating a business | |

Official Form 107

Page 33 of 48
Case number (if known) Debtor 1 **Jeffrey J Whiting**

| | | | | Debtor 1 | | | | | Debtor 2 | | |
|----|-----------------------------|-------------------------------------|---|---|---|------------------------------------|--|-----------------------------------|---|-------------------------------------|--|
| | | | | Sources of Check all t | | (bef | ess income fore deductions lusions) | and | Sources of inc Check all that a | | Gross income (before deductions and exclusions) |
| | r last caler anuary 1 to | ndar year: December | 31, 2015) | ■ Wages, bonuses, t | commissions, | | \$100,65 | 5.00 | ☐ Wages, combonuses, tips | missions, | |
| | | | | ☐ Operati | ng a business | | | | ☐ Operating a | business | |
| | | dar year bet December | | ■ Wages bonuses, t | commissions, | | \$92,66 | 4.00 | ☐ Wages, combonuses, tips | missions, | |
| | | | | ☐ Operati | ng a business | | | | ☐ Operating a | business | |
| | winnings. List each No | If you are fili | ng a joint cas | e and you h | ntal income; inter ave income that y ch source separat | ou rec | eived together, | list it or | ly once under De | ebtor 1. | d gambling and lottery |
| | 00. | · iii iii tiio do | iano. | Dahtan 4 | | | | | Dahtar 0 | | |
| | | | | Sources o Describe b | | eac (bef | ess income fro h source fore deductions lusions) | | Debtor 2 Sources of inc Describe below | | Gross income (before deductions and exclusions) |
| Pa | rt 3: Lis | t Certain Pa | yments You | Made Befor | e You Filed for I | Bankrı | uptcy | | | | |
| 6. | Are eithe No. | Neither Deindividual puring the No. | ebtor 1 nor D primarily for a 90 days befor Go to line 7 List below e paid that cri not include | personal, far personal, far pre you filed to each creditor editor. Do no payments to | mily, or househol for bankruptcy, di to whom you pai at include paymen an attorney for th | d you put a total ts for conis ban | ebts. Consume ose." pay any creditor al of \$6,425* or domestic suppo kruptcy case. | r a total more in rt obliga | of \$6,425* or mo one or more pay tions, such as ch | re? ments and t ild support a | 1(8) as "incurred by ar the total amount you and alimony. Also, do |
| | Yes. | Debtor 1 c | or Debtor 2 o | r both have | and every 3 years primarily consu for bankruptcy, di | mer d | ebts. | | | | |
| | | ■ No. | Go to line 7 | | | | | | | | |
| | | □ Yes | include pay | | mestic support ol | | | | | | t creditor. Do not include payments to a |
| | Creditor | 's Name and | I Address | | Dates of payme | nt | Total amo | unt aid | Amount you still owe | Was this | payment for |

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| Deb | otor 1 | Jeffrey J Whiting | Document | Cas | e number (if knowr | n) | |
|-----|----------------------|---|---|--|---|--------------------------------|---|
| 7. | <i>Inside</i> of whi | n 1 year before you filed for bankrupto ers include your relatives; any general pa ich you are an officer, director, person in iness you operate as a sole proprietor. 1 | ortners; relatives of any general control, or owner of 20% of | neral partners; partne or more of their voting | erships of which y g securities; and | ou are a gener any managing | al partner; corporations agent, including one for |
| | _ | No Yes. List all payments to an insider. | | | | | |
| | Insid | ler's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment |
| 8. | inside Includ | n 1 year before you filed for bankruptoer? le payments on debts guaranteed or cos No Yes. List all payments to an insider | | yments or transfer a | ny property on | account of a c | lebt that benefited an |
| | | ler's Name and Address | Dates of payment | Total amount | Amount you | Reason for | this payment |
| | | | . , | paid | still owe | | ditor's name |
| 9. | List al modifi | n 1 year before you filed for bankrupte Il such matters, including personal injury ications, and contract disputes. No Yes. Fill in the details. | | | | | rt or custody |
| | Ban Com Ellei | k of New York Mellon Trust npany v. Jeffrey J. Whiting and n M. Whiting H 002599 | Mortgage Foreclosure | Circuit Court fo Judicial Circuit Joliet, IL | | ☐ Pending ☐ On app ☐ Conclud | eal |
| 10. | Check | n 1 year before you filed for bankrupto c all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. | | erty repossessed, f | oreclosed, garn | ished, attache | d, seized, or levied? |
| | Cred | litor Name and Address | Describe the Property Explain what happene | | Date | 9 | Value of the property |
| | Pote 223 | k of New York estivo and Associates PC West Jackson Blvd, Ste 610 cago, IL 60606 | □ Property was reposs □ Property was foreclo □ Property was garnish □ Property was attached | e Dr, Plainfield, IL essed. sed. ned. | 60544 9/20 | 6/16 | \$0.00 |

2010 Volkswagen

 $\hfill\square$ Property was garnished.

 $\hfill\square$ Property was attached, seized or levied.

Capital One Auto Finance

\$10,000.00

October 2016

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| 11. | Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. | | | | | | | | | |
|-----|--|--------|--|-----------------------------------|---------------------------|--|--|--|--|--|
| | Creditor Name and Address | De | scribe the action the creditor took | Date action was taken | Amount | | | | | |
| 12. | Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes | | | | | | | | | |
| Par | List Certain Gifts and Contributions | | | | | | | | | |
| 13. | Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No □ Yes. Fill in the details for each gift. | | | | | | | | | |
| | Gifts with a total value of more than \$600 per person | | Describe the gifts | Dates you gave the gifts | Value | | | | | |
| | Person to Whom You Gave the Gift and Address: | | | | | | | | | |
| 14. | Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. | | | | | | | | | |
| | Gifts or contributions to charities that tot more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | | Describe what you contributed | Dates you contributed | Value | | | | | |
| Par | t 6: List Certain Losses | | | | | | | | | |
| 15. | Within 1 year before you filed for bankrupt or gambling? | cy or | since you filed for bankruptcy, did you lose any | thing because of thef | t, fire, other disaster, | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | | |
| | how the loss occurred | nclude | be any insurance coverage for the loss the amount that insurance has paid. List pending the claims on line 33 of Schedule A/B: Property. | Date of your loss | Value of property lost | | | | | |
| Par | t 7: List Certain Payments or Transfers | | | | | | | | | |
| 16. | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. | | | | | | | | | |
| | □ No■ Yes. Fill in the details. | | | | | | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | u | Description and value of any property transferred | Date payment or transfer was made | Amount of payment | | | | | |
| | James J. Morrone Law, PC 12820 South Ridgeland, Unit C Palos Heights, IL 60463 jamesmorrone@aol.com | | Attorney Fees | | \$1,050.00 | | | | | |

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Debtor 1 Jeffrey J Whiting

| 17. | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. | | | | | | | | | | |
|-----|--|--|---|-----------------|--|---|--|--|--|--|--|
| | Yes. Fill in the details. | | | | | | | | | | |
| | Person Who Was Paid Address | Description and v transferred | Description and value of any property transferred | | | Amount of payment | | | | | |
| 18. | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. | | | | | | | | | | |
| | Person Who Received Transfer | Description and v | Description and value of | | ny property or | Date transfer was | | | | | |
| | Address Person's relationship to you | | property transferred paym | | received or debts change | made | | | | | |
| | . S. S S. G. | | | | | | | | | | |
| 19. | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. | | | | | | | | | | |
| | Name of trust | Description and v | value of the prop | erty transferre | 2 4 | Date Transfer was | | | | | |
| | rame of trust | Description and 1 | and or the prop | city transferre | ,u | made | | | | | |
| Pai | List of Certain Financial Accounts, Ins | struments, Safe Deposi | t Boxes, and Sto | rage Units | | | | | | | |
| 20. | Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. | | | | | | | | | | |
| | | Land Aultoiteant | T | D | | 1 (b -1 | | | | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of accourtinstrument | clo: mo | e account was sed, sold, ved, or nsferred | Last balance before closing or transfer | | | | | |
| 21. | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? | | | | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, S State and ZIP Code) | | | contents | Do you still have it? | | | | | |
| 22. | | | | | | | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or I to it? Address (Number, S State and ZIP Code) | | | | Do you still have it? | | | | | |
| | | | | | | | | | | | |

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Debtor 1 Jeffrey J Whiting

| Pa | t 9: Identify Property You Hold or Control for | Someone Else | | | | |
|---|---|--|---------------|-----------------------|-----------------------|--|
| 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trus for someone. | | | | | | |
| | ■ No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | Describe the | property | Value | |
| Pa | t 10: Give Details About Environmental Inform | ation | | | | |
| For | the purpose of Part 10, the following definitions | apply: | | | | |
| | Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su | air, land, soil, surface water, ground | | | | |
| | Site means any location, facility, or property as to own, operate, or utilize it, including disposal | | aw, whether y | ou now own, operate, | or utilize it or used | |
| | Hazardous material means anything an environ hazardous material, pollutant, contaminant, or | | waste, hazaro | dous substance, toxic | substance, | |
| Rep | ort all notices, releases, and proceedings that y | ou know about, regardless of wher | they occurre | d. | | |
| 24. | Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | | nental law, if you | Date of notice | |
| 25. | Have you notified any governmental unit of any | release of hazardous material? | | | | |
| | ■ No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | | nental law, if you | Date of notice | |
| 26. | Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. | | | | | |
| | ■ No | | | | | |
| | ☐ Yes. Fill in the details. | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the | case | Status of the case | |
| Pa | t 11: Give Details About Your Business or Cor | nnections to Any Business | | | | |
| | | • | | | | |
| 27. | | · | • | | y business? | |
| | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | | |
| | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | |
| | ☐ A partner in a partnership | | | | | |
| | ☐ An officer, director, or managing execu | tive of a corporation | | | | |

 $\hfill\square$ An owner of at least 5% of the voting or equity securities of a corporation

Case 16-39659 Doc 1 Filed 12/17/16 Entered 12/17/16 10:49:00 Page 38 of 48 Case number (if known) Document Debtor 1 **Jeffrey J Whiting** No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. **Date Issued** Name Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jeffrey J Whiting Signature of Debtor 2 Jeffrey J Whiting Signature of Debtor 1 Date December 7, 2016 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

■ No

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| Fill in this infor | mation to identify your | casa: | | |
|--------------------------------------|---|----------------------|---|---|
| | | Lase. | | |
| Debtor 1 | Jeffrey J Whiting First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DIST | FRICT OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |
| | | | | |
| Official Fo | rm 108 | | | |
| Stateme | nt of Intentio | n for Indiv | riduals Filing Under Cha | apter 7 12/15 |
| | | | | • |
| | ividual filing under cha | - | l out this form if: | |
| _ | e claims secured by yo | | | |
| | sed personal property a | | ot expired. you file your bankruptcy petition or by the o | date set for the meeting of creditors |
| whiche | ever is earlier, unless th | | e time for cause. You must also send copie | |
| on the | form | | | |
| | eople are filing togethen and date the form. | in a joint case, bo | th are equally responsible for supplying co | rrect information. Both debtors must |
| • | | | | |
| | and accurate as possib our name and case nur | | needed, attach a separate sheet to this for | m. On the top of any additional pages, |
| | | | | |
| Part 1: List Y | our Creditors Who Have | e Secured Claims | | |
| • | • | art 1 of Schedule D | : Creditors Who Have Claims Secured by Pr | roperty (Official Form 106D), fill in the |
| information be | elow. editor and the property t | hat is collateral | What do you intend to do with the proper | ty that Did you claim the property |
| , | , | | secures a debt? | as exempt on Schedule C? |
| | | | | |
| Creditor's A | Ally | | ☐ Surrender the property. | □No |
| name: | | | ☐ Retain the property and redeem it. | <u>_</u> |
| Description of | 2017 Volkswagen | Passat | Retain the property and enter into a | ■ Yes |
| property | 2017 VOIKSWagen | dosat | Reaffirmation Agreement. Retain the property and [explain]: | |
| securing debt: | : | | Li Retain the property and texplain. | |
| | | | | |
| | our Unexpired Persona | | in Schedule G: Executory Contracts and Ur | povnirod Lagges (Official Form 106G) fill |
| | | | expired leases are leases that are still in eff | |
| You may assume | e an unexpired persona | Il property lease if | the trustee does not assume it. 11 U.S.C. § 3 | 365(p)(2). |
| Describe your u | unexpired personal pro | perty leases | | Will the lease be assumed? |
| | | · · | | _ |
| Lessor's name: Description of lea | ased | | | □ No |
| Property: | u004 | | | ☐ Yes |
| | | | | |
| Lessor's name: Description of lea | asad | | | □ No |
| Property: | assu | | | ☐ Yes |
| • | | | | 55 |
| Lessor's name: | | | | □ No |

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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| Deb | otor 1 | Jeffrey J Whiting | Case number (if known) | |
|--|-----------|--|--|-------------------------------|
| | scription | of leased | | ☐ Yes |
| 0 | porty. | | | Li res |
| | sor's na | me: of leased | | □ No |
| | perty: | | | ☐ Yes |
| | sor's na | me: of leased | | □ No |
| | perty: | or reaseu | | ☐ Yes |
| Lessor's name: Description of leased Property: | | | | □ No |
| | | or reaseu | | ☐ Yes |
| | sor's na | | | □ No |
| | perty: | of leased | | ☐ Yes |
| Par | t 3: | ign Below | | |
| | | lity of perjury, I declare that I have i at is subject to an unexpired lease. | ndicated my intention about any property of my estate that see | cures a debt and any personal |
| X | /s/ Je | ffrey J Whiting | x | |
| | | ey J Whiting cure of Debtor 1 | Signature of Debtor 2 | |
| | Date | December 7, 2016 | Date | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-39659 Doc 1 Filed 12/17/16 Entered 12/17/16 10:49:00 Desc Main Document Page 45 of 48

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

| In re | Jeffrey J Whiting | | Case No. | | |
|-------------|--|---|---|---|----------|
| | | Debtor(s) | Chapter | 7 | |
| | DISCLOSURE OF COMPEN | NSATION OF ATTOR | NEY FOR DE | EBTOR(S) | |
| (| Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing per rendered on behalf of the debtor(s) in contemplation of | g of the petition in bankruptcy, o | r agreed to be paid | to me, for services rendered | l or to |
| | For legal services, I have agreed to accept | | \$ | 1,050.00 | |
| | Prior to the filing of this statement I have received | | \$ | 0.00 | |
| | Balance Due | | \$ | 1,050.00 | |
| 2. | The source of the compensation paid to me was: | | | | |
| | \blacksquare Debtor \square Other (specify): | | | | |
| 3. | The source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. | ■ I have not agreed to share the above-disclosed compe | ensation with any other person un | nless they are memb | pers and associates of my la | ıw firm. |
| | ☐ I have agreed to share the above-disclosed compensa copy of the agreement, together with a list of the name | | | | n. A |
| 5. | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: | | | | |
| 1 | a. Analysis of the debtor's financial situation, and render of the Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of credito d. [Other provisions as needed] | ement of affairs and plan which r | nay be required; | | ; |
| 6.] | By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding.Negotia planning; preparation and filing of reaffii motions pursuant to 11 USC 522(f)(2)(A) | chargeability actions, judici tions with secured creditors rmation agreements and ap | ial lien avoidance s to reduce to ma plications as nee | arket value; exemption eded; preparation and f | |
| | | CERTIFICATION | | | |
| | certify that the foregoing is a complete statement of any ankruptcy proceeding. | agreement or arrangement for p | payment to me for re | epresentation of the debtor(| s) in |
| | ecember 7, 2016 ate | /s/ James J. Morron James J. Morrone Signature of Attorney James J. Morrone 12820 South Ridge Palos Heights, IL 6 (708) 653-3142 Fa lawoffice@jamesm Name of law firm | 6201661 Law, PC eland, Unit C 60463 x: (708) 653-3154 | | |

United States Bankruptcy Court Northern District of Illinois

| | | 1 (of the H District of Himos | | |
|-------|--|---|-----------------------|------------------------|
| In re | Jeffrey J Whiting | | Case No | |
| | | Debtor(s) | Chapter 7 | |
| | WE | RIFICATION OF CREDITOR M | / A TDIV | |
| | V E | RIFICATION OF CREDITOR N | IAIKIA | |
| | | Number of | Creditors: | 18 |
| | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of credi | tors is true and corr | rect to the best of my |
| Date: | December 7, 2016 | /s/ Jeffrey J Whiting Jeffrey J Whiting Signature of Debtor | | |

Advanced Family Dental/Shorewood Creditors Discount & Audit Co 415 E. Main Street Streator, IL 61364

Ally PO Box 380901 Minneapolis, MN 55438

American General Financial/Springleaf Fi Springleaf Financial/Attn: Bankruptcy De Po Box 3251 Evansville, IN 47731

Bank of New York Mellon Trust Potestivo & Associates PC 223 West Jackson, Ste 610 Chicago, IL 60606

Barclays Bank Delaware Po Box 8801 Wilmington, DE 19899

Capital One Po Box 30285 Salt Lake City, UT 84130

Capital One Po Box 30285 Salt Lake City, UT 84130

Capital One Auto Finance Attn: Bankruptcy Dept Po Box 30258 Salt Lake City, UT 84130

Collection Prof/lasalle Po Box 416 La Salle, IL 61301

Comenitycapital/gmstop Comenity Bank Po Box 182125 Columbus, OH 43218 Credit First/CFNA Bk13 Credit Operations Po Box 818011 Cleveland, OH 44181

Ellen Whiting

Internal Revenue Service PO Box 21126 Philadelphia, PA 19114

Kohls/Capital One Po Box 3120 Milwaukee, WI 53201

Kohls/Capital One Po Box 3120 Milwaukee, WI 53201

Merchants Credit 223 W Jackson Blvd Ste 700 Chicago, IL 60606

Ocwen Loan Servicing PO Box 785061 Orlando, FL 32878-5063

Synchrony Bank/Walmart Po Box 965064 Orlando, FL 32896